

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

| ALCO-SENSO | A IV WITH PF | RINTER MAINTI | ENANCE REF | POP | RECEIVED | | EPORT | |
|---|--|--|---|----------------------------|--|--|----------------|--|
| Complete this report in duplical Send copy to Department of He | e at the time of | the regular monthly Services: retain orio | preventative ma | ainte | By Carol Day | at 4:10 pm, Sep 06, | 2013 epaired | |
| ALCO SENSOR IY SN 097 76.2 | | PRINTER SN 35 | | | | DATE OF INSPECTION | } · · · | |
| LOCATION OF INSTRUMENT (STREET | AND CITY) | | No. 6330 | 3 | The state of the s | TIME OF INSPECTION, | , | |
| CHECKLIST: Place a mark in the ues where determined.) Unmark | e box by each it red items must b | em if found to be sa | itisfactory or if of using instrument | peratii t. | ng within estab | lished limits. (Write in | observed val | |
| DIGITAL READOUT (ALL E | | | | | | | | |
| TEMPERATURE OF ALCO | SENSOR (10°C | | | | | | | |
| PRINTER WORKING PRO | PERLY OK | *************************************** | AND EXPLORATION PROCESSAGE AND THE STATE OF | | | All Manager and American | | |
| TIME AND DATE DISPLAY | NG PROPERLY | ok | *************************************** | | | -A-5 (MASSAGE) X (MASSAGE) AND A STATE OF THE STATE OF TH | | |
| BREATH ALCOHOL ACCURAC | Y STANDARDS | | | | | | | |
| SIMULATOR SOLUTION ———————————————————————————————————— | | | | | | | | |
| STANDARD SUPPLIER | wth Labo | -storics 1 | от # <u>1210</u> | Ù | EXP. DATE | 7/8/14 | | |
| SIMULATOR TEMPERATUR | RE (34°C ± 0.2°(| c) 34° C sin | ULATOR SN | 182 | O SIMU | LATOR EXP DATE | 1/15-/14 | |
| less Check the box correspond of the corresponding | MUST READ BET MUST READ BET | TWEEN 0.095% an IWEEN 0.076% a n | d 0.105% INCLU d 0.084% INCLU | JSIVE JSI VE | | | 10074-08 | |
| TEST 1 - 099 | | T2 • • () 5 | 7 | | TEST 3 🖝 | .099 | | |
| RFI DETECTOR OPERATIN | a ok | | | | | | | |
| INDICATE THE NUMBER OF BI (DO NOT INCLUDE SELF-ADMI | REATH TESTS I | N THE FOLLOWIN | G RANGES SIN | ICE T | HE LAST MAI | NTENANCE REPORT | ! | |
| REFUSALS 3 (004) | O (.c |)509) | (.1014) | 1 | (.1519) | (OVER .19) | .3 | |
| List any new parts and describe established limits (use other side | any alteration or if necessary). | r modification that v | vas made to res | store t | he Instrument t | lo operate satisfactori | y and within | |
| | | | | | | | | |
| NSPECTING OFFICER | 1 1 l | | | F | BINT NAME | . 24 | | |
| P.O. Danie/ Alley 196 | | | | | Duniel Allen | | | |
| TYPE II PERMIT NUMBERJEXPJANION DATE | 11/22/1 | 3 | | 1 | 636) 94 | 14-3300 | | |
| Return completed report to the | Breath Alcoho 2875 James E Poplar Bluff, N | Boulevard | partment of Heal | th and | <u> </u> | es, Southeast District | Office | |



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 12100 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 20, 2012, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is July 18, 2014 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

uperator Name, .d.I ∫⊃stdu? Subject Name \$\$:80 CI/90/60 ZI Void: EFI J.GIJIE Time 210L 9/EII LEST RECORD 01104 Noteray Obab ton 234790 for Laines UI 2A (ansk noterage) 1.n. .∐.I ⊅⊃etdu≷ amsM 1⊃aidu? 660, 84:80 81/30/60 0S (alibration Check:

009° 64:80 61/90/60

Jake Time 210L

ପ୍ରାଧ୍ୟନ୍ତ ton

LESL KECOKD 01103

Saprea for Leines UI SA

Air Blank:

Pens

noisrey

1781 Zum

AS IV Serial no: 097462 Version no: 0040 TEST RECORD 01101 Temp Date Time 210L Air Blank: 09/06/13 08:40 .000 Calibration Check: 20 09/06/13 08:40 .099 Subject Name Subject I.D. Operator Name, I.D. P.O. D. Allen 196 Location AS IV Serial no: 097462 Wersion no: 0040 TEST RECORD 01102 Temp Date 9/ Time 210L Air Blank: 09/06/13 08:41 .000 Calibration Check: 20 09/06/13 08:41 .699 Subject Name Subject I.D. Operator Name, I.D. P.O. D. location